

Please type a plus sign (+) inside this box



PTO/SB/01 (12-97)

Approved for through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (surecharge ~~(37 CFR 1.16 (e))~~ required)

Attorney Docket Number		SPR6147P0010US
First Named Inventor		KELLOCK, Peter Rowan
COMPLETE IF KNOWN		
International Application Number	PCT/SG99/00142	
Filing Date	16 December 1999	
Group Art Unit		
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND METHOD FOR VIDEO PRODUCTION

the specification of which

(Title of the Invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

12/16/1999

as United States Application Number or PCT International

Application Number **PCT/SG99/00142** and was amended on (MM/DD/YYYY) **06/03/2000** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box



App. for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname	
Peter Rowan		KELLOCK	
Inventor's Signature			Date
			08/03/00
Residence: City	SINGAPORE	State	Country
			SINGAPORE
Post Office Address	113 Clementi Road, Block D, Kent Vale, #09-06		
Post Office Address			
City	SINGAPORE	State	Country
			Singapore
ZIP	129793	Country	

☐ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

085202100

0005 RAM TS

Please type a plus sign (+) inside this box →

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

PTO/SB/02A (3-97)
Appr use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

+

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Srikumar Karaikudi				SUBRAMANIAM			
Inventor's Signature		X K. S. Srikumar.		Date		03/03/00	
Residence: City		SINGAPORE		State		Country SINGAPORE	
Post Office Address		Block 311, Clementi Avenue 4, #10-259,		37, PASIR PANJANG COURT, PASIR PANJANG CLOSE		K. S. Srikumar.	
Post Office Address							
City		SINGAPORE		State		ZIP 118980 120311	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])						Family Name or Surname	
Ramanath						PADMANABHAN	
Inventor's Signature		X Ramanath		Date		03/03/00	
Residence: City		SINGAPORE		State		Country SINGAPORE	
Post Office Address		Block 506, West Coast Drive, #08-219,					
Post Office Address							
City		SINGAPORE		State		ZIP 120506	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])						Family Name or Surname	
Liang Kee						GOH	
Inventor's Signature		X g. h. kee		Date		03/03/00	
Residence: City		SINGAPORE		State		Country SINGAPORE	
Post Office Address		Block 22, Dover Crescent, #09-350,					
Post Office Address							
City		SINGAPORE		State		ZIP 130022	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

20

0005202100

46

+

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kellock et al.)
)
For: System and Method for Video)
Production)
)
Serial No.:)
)
From: PCT/SG99/00142)
)
Int. Filing Date: December 16, 1999)
)
Examiner:)
)
Art Unit:)

ASSOCIATE POWER OF ATTORNEY (37 C.F.R. 1.34)

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

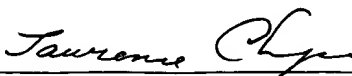
Please recognize as Associate Practitioners in this case the following additional

attorneys:

Martin L. Katz	Reg. No. <u>25,011</u>	Elaine M. Ramesh	Reg. No. <u>43,032</u>
Kathleen A. Lyons	Reg. No. <u>31,852</u>	Keith V. Rockey	Reg. No. <u>24,713</u>
John P. Milnamow	Reg. No. <u>20,635</u>	John F. Rollins	Reg. No. <u>38,013</u>
Lisa V. Mueller	Reg. No. <u>38,978</u>	Thomas I. Ross	Reg. No. <u>29,275</u>
Paul M. Odell	Reg. No. <u>28,332</u>	Joel E. Siegel	Reg. No. <u>25,440</u>
Robert B. Polit	Reg. No. <u>33,993</u>	Paul M. Vargo	Reg. No. <u>29,116</u>

Respectfully submitted,

BY



Lawrence J. Chapa, Reg. No. 39,135

ROCKEY, MILNAMOW & KATZ, LTD.

Two Prudential Plaza, 47th Floor

180 North Stetson

Chicago, Illinois 60601

Telephone: 312-616-5400

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT,
NOT ACCOMPANYING
APPLICATION**

Application Number	PCT/SG99/00142
Filing Date	16 December 1999
First Named Inventor	KELLOCK, Peter Rowan
Group Art Unit	
Examiner Name	
Attorney Docket Number	SPR6147P0010US

I hereby appoint:

☐ Practitioners at Customer Number **OR**☒ Practitioner(s) named below:

Place Customer
Number Bar Code
Label here

Name	Registration Number
Lawrence J. Chapa	39, 135
Randall T. Erickson	33, 872
Stephen D. Geimer	28, 846
Allen J. Hoover	24, 103

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	ROCKEY, MILNAMOW & KATZ, LTD.				
Address	Two Prudential Plaza - Suite 4700				
Address	180 North Stetson Avenue				
City	Chicago	State	Illinois	ZIP	60601
Country	U.S.A.				
Telephone	(312) 616-5400	Fax	(312) 616-5460		

I am the:

☒ Applicant.☐ Assignee of record of the entire interest
*Certificate under 37 CFR 3.73(b) is enclosed***SIGNATURE of Applicant or Assignee of Record**

Name	KELLOCK, Peter Rowan
Signature	<i>Peter Kellock</i>
Date	<i>03/03/00</i>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/81 (11-96)

Approved for use through 6/30/99. OMB 0651-0035

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT,
NOT ACCOMPANYING
APPLICATION**

Application Number	PCT/SG99/00142
Filing Date	16 December 1999
First Named Inventor	KELLOCK, Peter Rowan
Group Art Unit	
Examiner Name	
Attorney Docket Number	SPR6147P0010US

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
Lawrence J. Chapa	39, 135
Randall T. Erickson	33, 872
Stephen D. Geimer	28, 846
Allen J. Hoover	24, 103

Place Customer
Number Bar Code
Label here

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	ROCKEY, MILNAMOW & KATZ, LTD.				
Address	Two Prudential Plaza - Suite 4700				
Address	180 North Stetson Avenue				
City	Chicago	State	Illinois	ZIP	60601
Country	U.S.A.				
Telephone	(312) 616-5400	Fax	(312) 616-5460		

I am the:

☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

Name	SUBRAMANIAM, Srikumar Karaikudi
Signature	X <i>K.S. Subramaniam</i>
Date	X 02/03/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT,
NOT ACCOMPANYING
APPLICATION**

Application Number	PCT/SG99/00142
Filing Date	16 December 1999
First Named Inventor	KELLOCK, Peter Rowan
Group Art Unit	
Examiner Name	SPR6147P0010US
Attorney Docket Number	SPR6147P0010US

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
Lawrence J. Chapa	39, 135
Randall T. Erickson	33, 872
Stephen D. Geimer	28, 846
Allen J. Hoover	24, 103

Place Customer
Number Bar Code
Label here

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	ROCKEY, MILNAMOW & KATZ, LTD.				
Address	Two Prudential Plaza - Suite 4700				
Address	180 North Stetson Avenue				
City	Chicago	State	Illinois	ZIP	60601
Country	U.S.A.				
Telephone	(312) 616 - 5400	Fax	(312) 616 - 5460		

I am the:

☒ Applicant.☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed**SIGNATURE of Applicant or Assignee of Record**

Name	PADMANABHAN, Ramanath
Signature	X <i>Ramanath</i>
Date	X 03/03/00

Please type a plus sign (+) inside this box ☐

PTO/SB/81 (11-96)

Approved for use through 6/30/99. OMB 0651-0035

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT,
NOT ACCOMPANYING
APPLICATION**

Application Number	PCT/SG99/00142
Filing Date	16 December 1999
First Named Inventor	KELLOCK, Peter Rowan
Group Art Unit	
Examiner Name	
Attorney Docket Number	SPR6147P0010US

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
Lawrence J. Chapa	39, 135
Randall T. Erickson	33, 872
Stephen D. Geimer	28, 846
Allen J. Hoover	24, 103

Place Customer
Number Bar Code
Label here

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	ROCKEY, MILNAMOW & KATZ, LTD.				
Address	Two Prudential Plaza - Suite 4700				
Address	180 North Stetson Avenue				
City	Chicago	State	Illinois	ZIP	60601
Country	U.S.A.				
Telephone	(312) 616-5400	Fax	(312) 616-5460		

I am the:

☐ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

Name	GOH, Liang Kee
Signature	<i>X [Signature]</i>
Date	<i>X 03/03/00</i>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.